PTO/SB/17 (02-07)
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Complete if Known Comp	Under the Paperwork Reduction	Act of 1995	no persons are requir	ed to re	spond to a collection of	of informat	ion unless it display	s a valid OMB control number
FEE TRANSMITTAL FOR FY 2007 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 455.00 Examiner Name Brusca, John S.	FEE TRANSMITTAL			Complete if Known				
FIRST Named Inventor Schell Shams Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 455.00 Attorney Docket No. SSI001 Attorney Docket No.				Application Numb	cation Number 10/609,137			
Examiner Name Brusca, John S.				Filing Date	Ju	June 26, 2003		
Art Unit 1631				First Named Inver	ntor So	Soheil Shams		
None Second Art Unit 1631 Attorney Docket No. SSI001	Applicant claims small e	ntity status	See 37 CFR 1 27		Examiner Name	Br	Brusca, John S.	
METHOD OF PAYMENT (check all that apply)		·			Art Unit	16	1631	
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Other for the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Other for Other for the filing fee Other for Oth	TOTAL AMOUNT OF PAYM	ENT (\$)	455.00		Attorney Docket N	No. S	SI001	
Deposit Account Deposit Account Number Deposit Account Name:	METHOD OF PAYMENT	(check al	that apply)					
Deposit Account Deposit Account Number Deposit Account Name:	Check ✓ Credit Ca	ard [Money Order	Non	e Other (ple	ase identi	fy):	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below	11 1							
Charge any additional fee(s) or underpayments of fee(s) Verifit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Fee (\$) Fee (\$	For the above-identified	ed deposit						
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Credit any overpayments Credit any overpayments	✓ Charge fee(s) in	ndicated be	elow		Charge	fee(s) ind	dicated below ex	cent for the filing fee
WARNING: Information on this form ap become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION	Charge any add	ditional fee	(s) or underpayment	ts of fee	=			cept for the filling fee
Application Type	under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card							
Papel	FEE CALCULATION							
Papel	1. BASIC FILING, SEARC	CH, AND	EXAMINATION F	EES				
Application Type	·	FILING	FEES			EXAMIN		
Design 200 100 100 50 130 65	Application Type			Fee (\$)		Fee (\$)		Fees Paid (\$)
Plant 200 100 300 150 160 80	Utility	300	150	500				
Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claims over 3 (including Reissues) Multiple dependent claims Total Claims O - 20 or HP = 0 x 0 = 00	Design	200	100	100	50	130	65	
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Plant	200	100	300	150	160	80	
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims Multiple dependent claims Total Claims Extra Claims O - 20 or HP = O x O = 00 HP = highest number of total claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof for the paid (\$) Fee Paid (\$)	Reissue	300	150	500	250	600	300	
Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x Fee \$\frac{\star Shee (\star Sheets)}{\star Sheets} \frac{\star Sheets}{\star Sheets} \frac{\star Sheets}{\star Sheets} \frac{\star Sheets}{\star Sheets} \frac{\star Sheets}{\star Sheets} \frac{(\star Sheets)}{\star Sheets} (\star Shee	Provisional	200	100	0	0	0	0	
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Indep. Claims					00		Fee (\$)	Fee Paid (\$)
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets	Indep. Claims							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 =								
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sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fee (\$) Fee Paid (\$) Fees Paid (\$)	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
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Non-English Specification, \$130 fee (no small entity discount)	<u>Total Sheets</u>	Extra She	<u>ets</u> <u>Number</u>	of eacl	h additional 50 or	fraction	thereof Fee	(\$) Fee Paid (\$)
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SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	Telephone 310.414,8100
Name (Print/Type)	Soheil Shams		Date 06/22/2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Serial/Patent No: 10/609,137 Ma	iling Date:	6/22/2007
Serial/Patent No: 10/609,137 Ma Atty. Ref. No.: SS1001 Att Title: APPARATUS, METHOD, AND COMPUTER PROGRAM PRODU	orney:	
Title: APPARATUS, METHOD, AND COMPUTER PROGRAM PRODU	JCT FOR DETER	MINING GENE FUNCTION AND FUNCTIONAL GROUPS USING
Applicant: Soheil Shams		
The following, due 6/27/2007 in the U	J.S. Patent &	Trademark Office, was received in
	on the date	stamped hereon:
Patent Application,		•
Patent Application, including:	X	Amendment/Response (Office Action Response/RCE)
Pages of Specification, including:	X	Petition for Extension of Time (1 mths)
Claims		Amendment After Final Rejection
Page Abstract		Preliminary Amendment
Formal/Informal Drawings Sheet(s)	Letter to Official Draftsperson
Transmittal Letter		Notice of Appeal
Combined Declaration/Power of Attorney	,	Appeal Brief
Assignment with Form PTO 1619		Issue Fee Transmittal
X Fee Calculation Sheet (2 copies)		Maintenance Fee Transmittal
Priority Document(s)		PCT Request Form
IDS w/Form PTO 1449 w/		PCT Demand Form
references		Check No. for \$
X CREDIT CARD PAYMENT FORM in the	ne amount o	f \$ 455.00
X CERTIFICATE OF MAILING/EXPRESS	MAIL NO	•
Serial/Patent No: Mailing	n Doto:	
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Applicant: The following, due in the U.S.	Datent & T	rademark Office, was received in
the U.S. Patent & Trademark Office Mail Room on	the date cta	mned hereon:
Patent Application,	the date sta	inped hereon.
including:	,	Amendment/Response
Pages of Specification, including:	/	Petition for Extension of Time (mths)
Claims		Amendment After Final Rejection
- page Abstract		Preliminary Amendment
Formal/Informal Drawings Sheet(s)	'	Letter to Official Draftsperson
Transmittal Letter		Notice of Appeal
Combined Declaration/Power of Attorney		Appeal Brief
Assignment with Form PTO 1619		ssue Fee Transmittal
P 01 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1	Aaintenance Fee Transmittal
Priority Document(s)	N	PCT Request Form
IDS w/Form PTO 1449 w/		
references		CT Demand Form
CREDIT CARD PAYMENT FORM in the	amount of a	Check No for \$
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